2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000023532

Entity Name: THE BERLIN COGENT GROUP LLC

FILED Mar 20, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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23415 RIO DEL MAR DRIVE 2001 SW 20 STREET

BOCA RATON, FL 33486 SUITE 102

FORT LAUDERDALE, FL 33315

Current Mailing Address: New Mailing Address:

23415 RIO DEL MAR DRIVE 2001 SW 20 STREET

BOCA RATON, FL 33486 PB SUITE 102

FORT LAUDERDALE, FL 33315

FEI Number: 26-2107015 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SAFFER, NEIL WEBER, MARK
23415 RIO DEL MAR DRIVE 2001 SW 20 STREET

BOCA RATON, FL 33486 US SUITE 102

FORT LAUDERDALE, FL 33315 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MARK WEBER 03/20/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 SAFFER, NEIL
 Name:

 Address:
 23415 RIO DEL MAR DRIVE
 Address:

 City-St-Zip:
 BOCA RATON, FL 33486 PB
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 DAVIS, CRAIG
 Name:

 Address:
 6371 HOLLANDAIRE DRIVE EAST
 Address:

 City-St-Zip:
 BOCA RATON, FL 33433 US
 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

 Name:
 BERLIN, STEVEN DR
 Name:

 Address:
 6501 RED HOOK PLAZA
 Address:

 City-St-Zip:
 ST. THOMAS, VI 00802 US
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 PASSEN, SELVIN DR
 Name:

 Address:
 2001 SW 20TH ST. SUITE 102
 Address:

 City-St-Zip:
 FT. LAUDERDALE, FL 33315 US
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 KRIEGER, BENJAMIN W
 Name:

 Address:
 10929 HANDEL PLACE
 Address:

 City-St-Zip:
 BOCA RATON, FL 33498 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SELVIN PASSEN MGRM 03/20/2009